Final Performance Report

Award Years 2016 Forward

A Final Performance Report must be received within 45 days after the end of the grant agreement.

# Cover Page

Provide the following information in the order requested:

* <Click here to enter the Name of Organization>
* <Click here to enter the Name of Point of Contact>
* <Click here to enter the SCBGP-FB Agreement Number>
* <Click here to enter the Date Report is Submitted>

# Final Project Report Template

Final Performance Reports must illustrate the completion of the project.

## Project Title

Provide the project’s title. (Must be the same title used in the approved State Plan or amendment.)

**<Click here to enter project title>**

## Project Impact and Findings

Include a summary of the project results of 250 words or less, suitable for dissemination to the public. A statement of results provides a brief description of your project, its success, and/or lessons learned. A statement of results should:

1. Include the name of the organization that led and executed the project (State department of agriculture or subrecipient);
2. Capture the project’s purpose and activities completed;
3. Outline the outcomes and indicators achieved, results/important findings and lessons learned; and
4. Highlight the target population reached and products developed (including intended use and audience).

For example:

ABC State University improved protocol of integrated management of bacterial spot in tomatoes through focusing on the tomato seedling production stage and educating growers on best management practices. Researchers tested 240 processing and fresh market lines of tomato varieties in addition to 93 wild species for each variety’s resistance to bacterial spot. At the test’s conclusion, it was possible for researchers to obtain data sufficient to identify accessions and lines with elevated resistance to X. gardneri (the cause of bacterial spot) through expanded greenhouse screening. These results were disseminated to tomato transplant producers via comprehensive vegetable disease fact sheets that were posted online and which have been viewed over 1,700 times by 223 unique visitors. Furthermore, approximately 270 stakeholders were presented with project information at two field nights, two tomato disease workshops, and at a symposium.

<Click here to enter the Summary of Project Results. Limited to 250 words.>

## Beneficiaries

**Number of project beneficiaries**: Enter Number of Project Beneficiaries

## Activities Performed

### Objectives

Provide the approved project’s objectives.

|  |  |  |  |
| --- | --- | --- | --- |
| **#** | **Objective** | **Completed?** | |
| **Yes** | **No\*** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |

\*If no is selected for any of the listed objectives, you must expand upon this in the challenges and lessons learned sections.

### Accomplishments

List your accomplishments for the project’s period of performance, including the impact they had on the project’s beneficiaries, and indicate how these accomplishments assist in the fulfillment of your project’s objective(s), outcome(s), and/or indicator(s).

|  |  |
| --- | --- |
| **Accomplishment/Impact** | **Relevance to Objective, Outcome, and/or Indicator** |
|  |  |
|  |  |
|  |  |

### Challenges

If you experienced any challenges during the project’s period of performance, provide a listing of them below. Also, provide the corrective actions you took to address these issues. If you did not attain the approved outcome(s) and indicator(s), provide an explanation in the Corrective Actions column.

|  |  |
| --- | --- |
| **Challenge** | **Corrective Actions** |
|  |  |
|  |  |
|  |  |

### Lessons Learned

Provide recommendations or advice that others may use to improve their performance in implementing similar projects.

<Click here to describe or enter N/A>

### Continuation and Dissemination of Results (If Applicable)

Describe your plans for continuing the project (sustainability; capacity building) and/or disseminating the project results.

<Click here to describe or enter N/A>

## Outcome(s) and Indicator(s)/Sub-Indicator(s)

Provide the results of the project outcome(s) and indicator(s) as approved in your State Plan and project proposal. The results of the outcome(s) and indicator(s) will be used to evaluate the performance of the SCBGP on a national level.

### Outcome Measure(s)

Select the Outcome Measure(s) that were approved for your project.

**Outcome 1**: Enhance the competitiveness of specialty crops through increased sales

**Outcome 2**: Enhance the competitiveness of specialty crops through increased consumption

**Outcome 3**: Enhance the competitiveness of specialty crops through increased access

**Outcome 4**: Enhance the competitiveness of specialty crops though greater capacity of sustainable practices of specialty crop production resulting in increased yield, reduced inputs, increased efficiency, increased economic return, and/or conservation of resources

**Outcome 5**: Enhance the competitiveness of specialty crops through more sustainable, diverse, and resilient specialty crop systems

**Outcome 6**: Enhance the competitiveness of specialty crops through increasing the number of viable technologies to improve food safety

**Outcome 7**: Enhance the competitiveness of specialty crops through increased understanding of the ecology of threats to food safety from microbial and chemical sources

**Outcome 8**: Enhance the competitiveness of specialty crops through enhancing or improving the economy as a result of specialty crop development

### Outcome Indicator(s)

Provide the indicator approved for your project and the related quantifiable result. If you have multiple outcomes and/or indicators, repeat this for each outcome/indicator.

<Click here to provide the results of the indicator approved for your project>

### Data Collection

Explain what data was collected, how it was collected, the evaluation methods used, and how the data was analyzed to derive the quantifiable indicator.

<Click here to explain the data collection>

## Contact Person

**Contact Person for the Project** Enter Contact First and Last Name

**Telephone Number** Enter Phone Number

**Email Address** Enter Email Address

## Expenditures to Date

### Expenditures

|  |  |  |
| --- | --- | --- |
|  |  | **Expenditures to Date** |
| **Total Expenditures** |  |  |
|  | **Source of program income**  **(i.e. registration fees)** |  |
| **Program Income (if applicable)** |  |  |
|  | **Source of matching funds**  **(i.e. salary, etc.)** |  |
| **Matching Funds (if applicable)** |  |  |

## Additional Information

Provide additional information available (i.e., publications, websites, photographs) that is not applicable to any of the prior sections.

Be sure to include any documents, publications, or other attachments referenced throughout the report. If the attachments are large, the State Department of Agriculture should consider combining them as an appendix to the full report and submitting the appendix as a separate file.

<Click here to provide additional information or enter N/A>